

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90118 020 ***150.00

0630179 AB

DOCUMENT # 818340

1. Entity Name

KING RANCH, INC.

Principal Place of Business

**HWY 141 WEST-LAURO'S HILL
PO BOX 1090
KINGSVILLE TX 78364-1090
US**

Mailing Address

**HWY 141 WEST-LAURO'S HILL
PO BOX 1090
KINGSVILLE TX 78364-1090
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

74-0726547

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNDERBRINK, ROBERT J.
8050 SOUTH U.S. HWY 27
SOUTH BAY FL 33493**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CLEMENT, JAMES H JR 1415 LOUISIANA ST SUITE 2300 HOUSTON TX 77002 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CLEMENT, JAMES H., JR. THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO HUNT, JACK 1415 LOUISIANA ST SUITE 2300 HOUSTON TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO HUNT, JACK THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTCF GARDINER, BILL 1415 LOUISIANA ST SUITE 2300 HOUSTON TX <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTCF GARDINER, WILLIAM J. THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V UNDERBRINK, ROBERT 1415 LOUISIANA, SUITE 2300 HOUSTON TX 77002 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V UNDERBRINK, ROBERT THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GENHO, PAUL 1415 LOUISIANA, SUITE 2300 HOUSTON TX 77002 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GENHO, PAUL THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PERRONE, FRANK THREE RIVERWAY, SUITE 1600 HOUSTON, TX 77056 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W. J. Gardiner* WILLIAM J. GARDINER

1/28/2002 (832) 681-5700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)